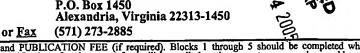
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

75	E ADDRESS (Note: Use Block 1 for :	any change of address)	Note: A certificate of Fee(s) Transmittal. I papers. Each addition have its own certifications.	of mailing can only be used for this certificate cannot be used and paper, such as an assignment of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must	
Fay Kaplun & Marcin, LLP Suite 702 150 Broadway New York, NY 10038 4/2005 RFEKADU2 00000032 10717062		DEC 0 2 70	I hereby certify that States Postal Service addressed to the M transmitted to the U	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimit transmitted to the USPATO (571) 273-2885, on the date indicated below. Oleg F Maplum, Esq. (Depositor page)		
:1501 :1504	1400.00 OP 300.00 OP		November 29,	, 2005	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAM	IED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/717,062	11/19/2003	Hal	Charych	1471	7223	
APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1400	PUBLICATION FEE \$300	\$1700	02/16/2006	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	٦.		
						
PHAM, TO	AN NGOC	2632	340-572800	- (-)		
1. Change of correspondence CFR 1.363). 2. Change of correspond Address form PTO/SB/1.	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indication more recent) attached. Use	ee Address" (37 2. For p	340-572800 rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a ed attorney or agent) and the named patent attorneys or agents. The printed of the pri	tent attorneys 1 FAT KA	PLUN & MARCIN,	
1. Change of correspondence CFR 1.363). 2. Change of correspond Address form PTO/SB/1: 2. "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B	Correspondence Correspondence ation form e of a Customer Correspondence (1) the or agen (2) the register 2 regist isted, 1 E PRINTED ON THE PATE	rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a ed attorney or agent) and the name of the patent attorneys or agents. On name will be printed.	tent attorneys 1 FAT KA s a member a ames of up to If no name is 3		
1. Change of correspondence CFR 1.363). 2. Change of correspond Address form PTO/SB/1: 2. "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B	Correspondence Correspondence ation form e of a Customer Correspondence (1) the or agen (2) the register 2 regist isted, 1 E PRINTED ON THE PATE	rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a ed attorney or agent) and the named patent attorneys or agents. The printed is the printed of the printed is the printed of the patent attorneys or agents.	tent attorneys 1 FAT KA s a member a ames of up to If no name is 3		
1. Change of correspondence CFR 1.363). 2. Change of correspond Address form PTO/SB/1: 2. "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND	e address or indication of "Formula and address of Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use the company of the c	Correspondence Correspondence ation form e of a Customer E PRINTED ON THE PATE clow, no assignee data will a of this form is NOT a substitu	rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a ed attorney or agent) and the name of the patent attorneys or agents. On name will be printed.	tent attorneys 1 FAT KA as a member a 2 ames of up to If no name is 3 ignee is identified below, the	PLUN & MARCIN, I	
1. Change of correspondence CFR 1.363). 2. Change of correspond Address form PTO/SB/1: 2. Tree Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO E an assignee is identified be a 37 CFR 3.11. Completion EE	Correspondence ation form e of a Customer E PRINTED ON THE PATE clow, no assignee data will a of this form is NOT a substit (B) RESIDE	rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a red attorney or agent) and the name of a strong and the name will be printed. ENT (print or type) Appear on the patent. If an assiste for filing an assignment.	tent attorneys 1 FAT KA as a member a 2 ames of up to If no name is 3 ignee is identified below, the		
I. Change of correspondence CFR 1.363). Acheange of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use PRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion EE	Correspondence Correspondence ation form e of a Customer E PRINTED ON THE PATE clow, no assignee data will a of this form is NOT a substite (B) RESIDE	rinting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a red attorney or agent) and the name of a single firm (having a red patent attorneys or agents. The patent attorneys or agents. The patent of the patent of the patent. If an assiste for filing an assignment. NCE: (CITY and STATE OR C	tent attorneys 1 FAT KA as a member a ames of up to If no name is 3 ignee is identified below, the	document has been filed f	
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN SYMBOL TECHN Please check the appropriate 4a. The following fee(s) are	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B an assignee is identified be a 37 CFR 3.11. Completion EE NOLOGIES, INC. c assignee category or category enclosed:	Correspondence Correspondence ation form e of a Customer CPRINTED ON THE PATE elow, no assignee data will a of this form is NOT a substit (B) RESIDE HOL ories (will not be printed on the payment 4b. Payment A che	winting on the patent front page, names of up to 3 registered pates OR, alternatively, names of a single firm (having a ed attorney or agent) and the name of a single firm (having a red patent attorneys or agents. So name will be printed. ENT (print or type) Expect on the patent. If an assiste for filing an assignment. ENCE: (CITY and STATE OR CONTINUE (CITY and STATE OR CONTINUE).	tent attorneys 1 FAT KA as a member a a same a member a as a member a a same a member a same a mem	document has been filed f	
I. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN SYMBOL TECHNOLOGY Please check the appropriate 4a. The following fee(s) are publication Fee (No. 1).	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use an assignee is identified by 37 CFR 3.11. Completion EE NOLOGIES, INC. e assignee category or category enclosed:	2. For particle of the content of this form is NOT a substitution of this not substitu	winting on the patent front page, names of up to 3 registered pats OR, alternatively, name of a single firm (having a ed attorney or agent) and the name of a single firm (having a red patent attorneys or agents. The control of the patent of the patent. If an assiste for filing an assignment. NCE: (CITY and STATE OR CONTROL OF SVILLE, NY the patent): Individual of Fee(s): ck in the amount of the fee(s) is ent by credit card. Form PTO-20.	tent attorneys 1 FAT KA as a member a 2 ames of up to If no name is 3 ignee is identified below, the COUNTRY) (Corporation or other private g enclosed. 038 is attached.	document has been filed f	
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN SYMBOL TECHN Please check the appropriate 4a. The following fee(s) are	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use an assignee is identified by 37 CFR 3.11. Completion EE NOLOGIES, INC. e assignee category or category enclosed:	Correspondence Correspondence ation form e of a Customer E PRINTED ON THE PATE clow, no assignee data will a of this form is NOT a substit (B) RESIDE HOLT bries (will not be printed on the 4b. Payment A che ed) The I	winting on the patent front page, names of up to 3 registered pats OR, alternatively, and the name of a single firm (having a ed attorney or agent) and the name of a single firm (having a ed attorney or agent) and the name will be printed. ENT (print or type) appear on the patent. If an assiste for filing an assignment. NCE: (CITY and STATE OR CONSTILLE, NY the patent): Individual of Fee(s): ck in the amount of the fee(s) is	tent attorneys 1 FAT KA as a member a ames of up to If no name is 3 ignee is identified below, the COUNTRY) (Corporation or other private g enclosed. 038 is attached. y charge the required fee(s), o	document has been filed in	

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the other patent and Trademark Office.

Authorized Signature

November 29, 2005

45,559 Registration No.

Typed or printed name Oleg F. Kaplun, Esq.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.